



UCC FINANCING STATEMENT AMENDMEN	1T		
FOLLOW INSTRUCTIONS (front and back) CAREFULLY			
A. NAME & PHONE OF CONTACT AT FILER [optional]			
Marilyn McCue 205-868-4839			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
First Commercial Bank			
P.O. Box 11746			
Birmingham, Al 35202			
	THE ABOVE SPA	ACE IS FOR FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE #		1b. This FINANCING STATEMENT	AMENDMENT is
2000-43399 Shelby County		to be filed [for record] (or record REAL ESTATE RECORDS.	rded) in the
2. TERMINATION: Effectiveness of the Financing Statement identified above it	is terminated with respect to security interest(s) of the		ion Statement.
3. CONTINUATION: Effectiveness of the Financing Statement identified about continued for the additional period provided by applicable law.	The with respect to security interest(s) of the Secured	- Party authorizing this Continuation Sta	
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and	address of assignee in item 7c; and also give name of	assignor in item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects De	ebtor or Secured Party of record. Check only or	ne of these two boxes.	
Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in	items 6 and/or 7.		
CHANGE name and/or address: Please refer to the detailed instructions	DELETE name: Give record name to be deleted in item 6a or 6b.	ADD name: Complete item 7a or item 7c; also complete items 7e-7	
in regards to changing the name/address of a party. 6. CURRENT RECORD INFORMATION:	T to be deleted in item oa of ob.	I I ILEITI / C. also comprete ileitis / e-/	ru (ii applicable).
6a. ORGANIZATION'S NAME			<u></u>
Caldwell Mill, LLP			
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
TOD. INDIVIDUALS EAST NAME	THICST MAINE	INIDOLE MANAGE	JOHN
7. CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
OR 76. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
7d. SEE INSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	Za OBCANIZATIONAL ID # if any	<u></u>
ORGANIZATION	71. JUNISUICTION OF UNGANIZATION	7g. ORGANIZATIONAL ID #, if any	
DEBTOR			NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			
Describe collateral deleted or added, or give entire restated collater	ral description, or describe collateral assigned.		
Partial Release:			
rartial Release.			
T .			
Lots 119, according to the Survey			<u>-</u>
recorded in Map Book 32, Page 103	3 A and B, in the Probate	Office of Shelby	County,
Alabama.			
			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME adds collateral or adds the authorizing Debtor, or if this is a Termination authorized			by a Debtor which
9a. ORGANIZATION'S NAME	by a Debtor, Check here and enter harne of DEB	- Ch admonzing this Amendment.	
First Commercial Bank			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
10. OPTIONAL FILER REFERENCE DATA			

REORDER FROM

Registré, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(763) 421-1713